Remarkable survival improvement for European patients with haematological malignancies from 1997 to 2008

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Remarkable survival improvement for European patients with haematological malignancies from 1997 to 2008

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Objective

Innovative effective treatment for haematological malignancies (HMs) have become available since 2000's.

The aim of this study was to estimate time trends in population-based survival for 11 lymphoid and myeloid malignancies, in particular for diffuse large B-cell lymphoma (DBLCL), follicular lymphoma (FL), chronic myeloid leukaemia (CML) and acute promyelocytic leukaemia (APL).

Materials and methods

102 European cancer registries (CRs) recording adult HMs cases

5 CRs excluded because:
>14% DCO or autopsy
>30% cases not microscopically veriefied

35 CRs had continous incident data from 1992 to 2007

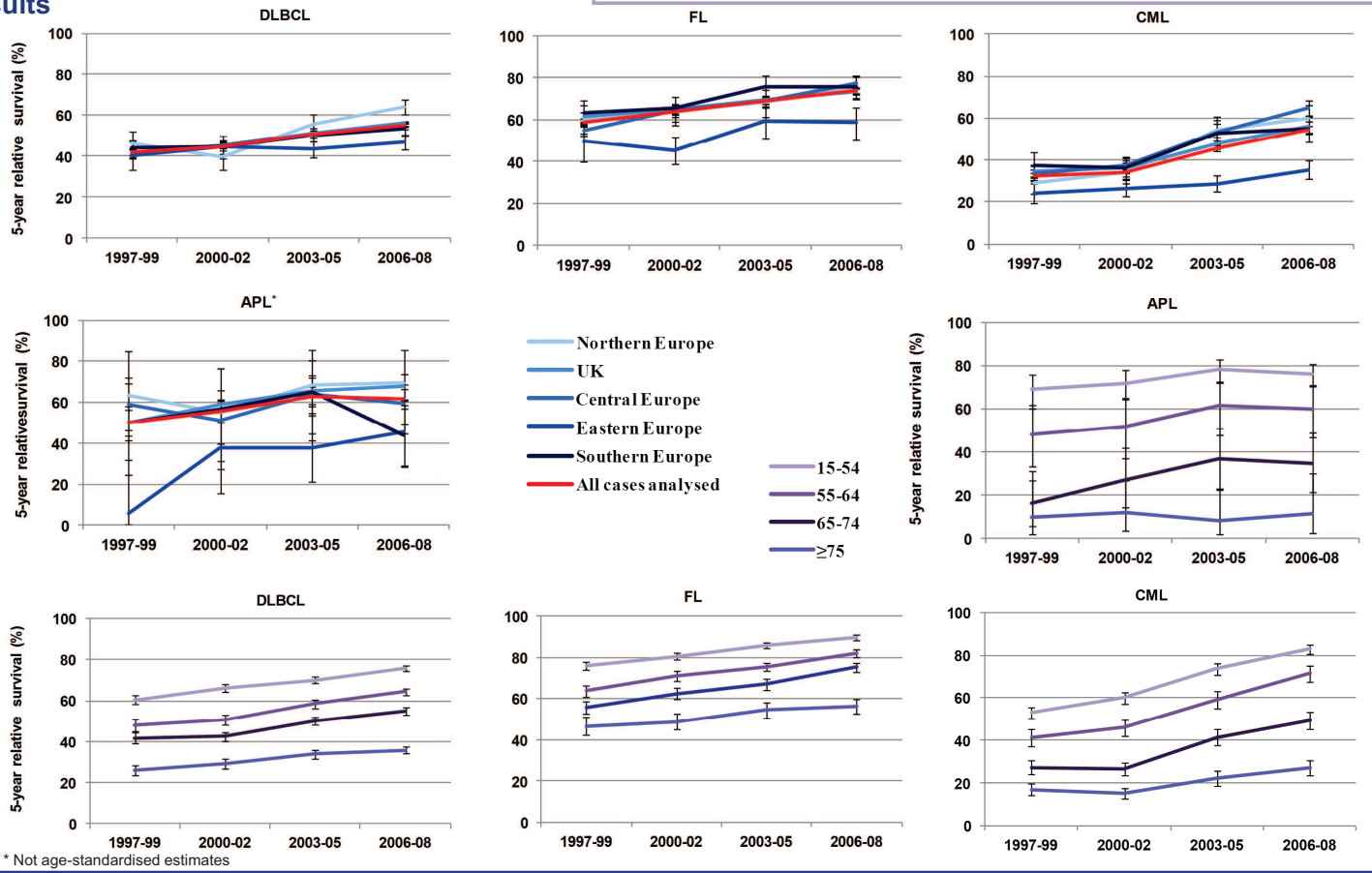
30 CRs included in the study

- 5-year relative survival
- hybrid approach
- trends by 3-year periods (1997-99, 2000-02, 2003-05, 2006-08)

Analyses by European area

Analyses by age at diagnosis

Results



* Not age-standardised estimates

Discussion

The increased survival over time is likely attributable linked to the diffusion of targeted and other new effective treatments.
The large differences in cancer survival across Europe suggest inequalities in the provision of care and the availability of new treatments.
Population-based high resolution studies, collecting data on morphology, treatments and stage, can provide evidence of the above written hypotheses.

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